



NORTH CAROLINA RESIDENCE AND TUITION STATUS APPLICATION

Under North Carolina Law, a person may qualify as a resident for tuition purposes in North Carolina and thereby eligible for a tuition rate lower than that for nonresidents. The North Carolina General Assembly, by and through its enactment, has determined that lower tuition rates be available only to NC legal residents. To be eligible for the in-state rate, the applicant must demonstrate each of the following:

1. **Capacity and Presence**—must be physically present in NC and able to make NC a permanent home
2. **Intent**—must show evidence or actions of a permanent home in NC
3. **Duration**—must show intent for 12 full months prior to the date you submit this application

In essence, the controlling North Carolina statute (G.S. 116-143.1) requires that “To qualify as a resident for tuition purposes, a person must have established legal residence (domicile) in North Carolina and maintained that legal residence for as least 12 months immediately prior to his or her classification as a resident for tuition purposes. Statutory definitions, rules, and special provisions for determining residence status for tuition purposes are also set forth in the statute and include special rules with respect to persons who are minors, married persons, members of the armed forces, aliens, federal personnel, and prisoners. Exceptions are also made for teachers, emergency workers and persons 65 years or older. Copies of the applicable law and of implementing regulations are available for inspection in the Admissions Office, and the College Library; and may be examined upon request.

DIRECTIONS

If you possess the capacity/presence, intent, and duration to be classified as a NC resident for tuition purposes, complete this application as follows:

- 1 Respond to all questions within the part(s) of the form that you are to complete. If any question is not applicable to your situation, write “NA” in the space provided. **DO NOT LEAVE ANY QUESTION BLANK.**
- 2 Print or type your responses. If necessary, write “see attached” in the space provided and use additional sheets, numbering your responses the same as the corresponding questions and attaching these sheets to this application.
- 3 Be completely accurate. Knowingly falsifying your responses may subject you to disciplinary action including dismissal from the institution.
- 4 When “Date” is requested, be sure to give day, month, and year.
- 5 Sign and date this application where indicated to acknowledge and certify this as a viable application.

PLEASE NOTE:

1. Copies of at least **TWO** forms of supporting **LEGAL** documentation **MUST** be attached at the time you submit this application (See Question 20)
2. Residency is determined when you submit this application, not when classes begin

SPECIAL DIRECTIONS:

- Question 18** List anyone **INCLUDING YOURSELF** (spouse) who claims you as a tax dependent
- Question 20e** Include property **OWNERSHIP** where you live only; not leases
- Question 20g** Intangible items include bonds, notes, annuities, estate interest, trusts, accounts receivables, land contracts, etc.
- Question 20k** Include vehicle registrations for the past 24 months
- Question 22** Indicate where all your “Stuff” is located; write the percentage, not the value or amount
- Question 24** Complete for this year and last year; indicate the **PERCENTAGE**, not the **AMOUNT OF MONEY**; for example, do you live 100% off your earnings or do you need to use savings or money from parents/guardians/trust funds, SSI, alimony, child support, etc? If so, list percentages for each, and the total percentage must equal 100%
- Question 26** Complete this page for **ANYONE** (including spouse) who claims you as a tax dependent within the past 24 months

You will be notified by mail of the determination of your tuition status. If you do not agree with this determination, you may appeal the decision in writing to the Senior Director of Student Services **within 10 days** of the date on your residency classification letter.

Student’s Printed Name _____

Date _____

This form must be submitted within 10 business days of the first day of the semester for which you seek in-state classification.

Admissions Officer _____

Approved _____ Denied _____

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APPLICANT INFORMATION

1. Applicant Student's Full Name _____
2. Citizenship: _____
(If not a US citizen, attach completed Supplemental Form) If Supplemental Form attached, check here
3. Date of birth: _____ Place of birth: _____
4. Address while attending institution (current): _____
5. Permanent home address: _____
Since: _____ Telephone: _____
6. Previous home address in NC: _____
From: _____ To: _____
Last previous home address outside NC: _____
From: _____ To: _____
7. Are you currently enrolled in this institution? (Yes or No) _____ Are you applying for admission? _____
Circle earliest term and indicate year in which you want this decision to apply:
Year _____ Fall _____ Spring _____ Summer, First Session _____ Summer, Second Session _____
8. Why did you move your home to North Carolina: _____
On what date did you move your home to North Carolina: _____
9. From what state or foreign country did you move your home and legal residence: _____
10. When do you claim your legal residence in NC began? _____
11. Has your residence status for tuition purposes been previously determined by a North Carolina public educational institution? (Yes or No) _____ If yes, (A) Name of institution: _____
(B) Classification: Resident _____ Nonresident _____
(C) Last term and year you were so classified: _____

12. Secondary (high or preparatory) schools you attended in sequence:

Name	Address (place & state)	From (date)	To (date)

13. List ALL post-secondary schools (universities, colleges, junior colleges, community colleges, etc.) you have attended, in sequence (including this institution):

Institution	Address (place & state)	From (date)	To (date)

14. Father living? (Yes or No) _____ Name _____ Occupation _____

Permanent home address: _____ Since: _____

15. Mother living? (Yes or No) _____ Name _____ Occupation _____

Permanent home address: _____ Since: _____

16. Parents separated or divorced? (Yes or No) _____ Who has/had custody of you? _____

17. Legal Guardian? (Yes or No) _____ Name _____ Occupation _____

Permanent home address: _____ Since: _____

Court appointed at (place) _____ (on date) _____

18. Who (including yourself) last claimed you as an exemption on state and/or federal income tax returns, for what tax year, and in what state filed?

a) On state return for _____ tax year, filed in (state) _____ on (date) _____

Name _____ Relationship to you _____

b) On federal return for _____ tax year, filed in (state) _____ on (date) _____

Name _____ Relationship to you _____

c) Does anyone intend to claim you as a dependent on state and/or federal income tax returns for the current tax year? (Yes or No) _____

19. List in chronological order to date of this application *all* places you have spent at least 7 consecutive days during the past three years. Your response must include your current address, all other places lived, and vacations.

Place (city and state)	Occupation or Purpose	From (date)	To (date)

20. When and where (state or foreign country) did you do each of the following during the last 24 months? List *each* time you did each such act (If not done in the last 24 months, list where and when such acts were done the last time you did them; if *never done at all*, write "never"):

**Documentation required	Where/Month/Day/Year	Where/Month/Day/Year	Where/Month/Day/Year
a) Registered to vote			
b) Voted			
c) Called to serve on jury duty			
d) Acquired or renewed driver's license			
e) Acquired ownership of property for use as your principal dwelling			
f) Inclusive dates of such property ownership:	from: to:	from: to:	from: to:
g) Filed state intangibles tax return			
h) Listed personal property for taxation in the county where you live			
i) Filed state income tax return Did you file as a resident or nonresident?			
j) Had state income tax withheld during the current tax year?	Yes No	State(s)	
Beginning (Month/Day/Year)			
During the previous year?	Yes No	State(s)	
Beginning (Month/Day/Year)			
Was all of the amount withheld refunded to you?	Yes No		

k) Registered/licensed a motor vehicle (car, truck, or other requiring license)		
Type of vehicle (list all)	where registered/licensed	(Month/Day/Year)

21. The car(s) or other motor vehicles which you maintain and operate in NC are owned by

(name) _____ (address) _____

Registered/licensed in (state or foreign country) _____ insured in the name of _____

(address) _____

22. List the addresses at which you own and maintain personal property (clothing, furniture, cars, boats, checking or savings accounts, stocks, bonds, pets, jewelry, appliances, etc.) and give percentage of value (of total personal property) maintained at each address:

Address	% at this address

23. List your employment for wages in the last 24 months:

Job Title	Employer	Address (place & state)	Dates		Hours per week
			(from)	(to)	

24. Of the total money required to meet your expenses, what percentage came from each of the following sources and what was it used for?

Source	Preceding Calendar Year (Jan.-Dec.)		Current Calendar Year (Jan.-Dec.)	
	% of Total	Used For	% of Total	Used For
Your earnings				
Your savings				
Parents(s) or Guardian: Name				
Other (specify):				
Total	100%		100%	

25. a) Have you or either of your parents been in active military service within the past two years?

(Yes or No) ____ If so, for each such person, ATTACH copies of the "Leave and Earnings Statements" for the most recent pay period and for the pay period 12 months ago.

b) If you or either of your parents have been in active military service or other federal government employment within the past two years, answer the following for each such person:

Name(s) _____ Relationship to you _____

Home address upon entry _____

Official "home of record" _____ Official home address now _____ Date this home address was declared _____

Home address upon discharge _____

Date of discharge _____ Legal residence most recently claimed on DD Form 2058 (State of Legal Residence Certificate) _____ Date that DD Form 2058 was completed _____

Place to which mileage was paid upon discharge _____

State for which income tax withheld _____ From what date? _____

26. Answer the questions below for each of the following individuals:

- Your parents (or legal guardian) if you now live with them or have lived with them in the past 24 months OR for ANYONE who has claimed you as a dependent for tax purposes in the past 24 months.

Answer this question for your *father* unless your parents are separated or divorced. If your parents are separated or divorced, answer this question for both parents.

- Any other person who has claimed you as a dependent for tax purposes within the past 24 months.

a) Name(s) _____ Relationship to you _____
 Permanent home address _____
 Lived at this address since (date) _____
 Last previous home address _____
 from (date) _____ to (date) _____

b) Where (state or foreign country) and when did this person do each of the following during the last 24 months? List each time he or she did each such act. (If not done in the last 24 months, where and when did he or she do these acts last? If *never* done at all, write "never"):

	Where/Month/Day/Year	Where/Month/Day/Year	Where/Month/Day/Year
a) Registered to vote			
b) Voted			
c) Called to serve on jury duty			
d) Acquired or renewed driver's license			
e) Acquired ownership of property for use as your principal dwelling			
f) Inclusive dates of such property ownership:	from: _____ to: _____	from: _____ to: _____	from: _____ to: _____
g) Filed state intangibles tax return			
h) Listed personal property for taxation in the county where you live			
i) Filed state income tax return Did you file as a resident or nonresident?			
j) Registered/licensed motor vehicle(s)			

k) Claimed you as an exemption on state income tax return for _____ tax year, filed in (state) _____ on (date) _____; federal income tax return for _____ tax year, filed in (state) _____ on (date) _____

27. If there are additional circumstances, events, or acts that you feel support your claim to North Carolina legal residence (domicile) for tuition purposes, attach a description of each, specifying the place and date of its occurrence.

- I hereby acknowledge that completion of Item 2 (Social Security number) is voluntary, is requested by the institution solely for administrative convenience and record-keeping accuracy, and is requested only to provide a personal identifier for the internal records of this institution.
- I hereby certify that all information I have set forth herein is true to the best of my knowledge, pursuant to my reasonable inquiry where needed.
- I hereby acknowledge that the institution may verify the information set forth herein from sources accessible under law to the institution but that the institution may divulge the contents of this application only as permitted under the Family Educational Rights and Privacy Act of 1974 if I am, or have been, in attendance at this institution.

 Applicant's signature

 Date

 Signature of parent or guardian (if applicant is under 18 years of age)

 Date